24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 1 OF 2 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Every Voice Action	C C00566208
	O constant
Check if 24-hour report X 48-hour report New report Amends report filed on	
Full Name of Payee	Date of Public Distribution/Dissemination
Buying Time	09 18 2014
Mailing Address 650 Massachusetts Ave NW	Amount
Ste 210	200424-00
City State Zip Code Washington DC 20001-3728	200131.00 Transaction ID: VN7BA9VK839 Date of Disbursement or Obligation
Purpose of Expenditure Advertising Category/ Type 004	09 16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	e Sought: House District:
Mike Rounds Oppose	President Senate State: SD
Calendar Year-To-Date Per Election for Office Sought Disbut 211391.00	ursement For: Primary X General Other (specify) ▶
Full Name of Payee Every Voice	Date of Public Distribution/Dissemination
Mailing Address 1133 19th St NW	09 18 2014
FI 9	Amount
City State Zip Code	1000.00
Washington DC 20036-3612	Transaction ID : VN7BA9VP3B6 Date of Disbursement or Obligation
Purpose of Expenditure Social Media Advertisement Costs Category/ Type 004	09 / 18 / 2014
Name of Federal Candidate Support Offic	e Sought: House District:
Mike Rounds Oppose	President Senate State: SD
Calendar Year-To-Date Per Election for Office Sought Disb 2014	ursement For: Primary ⊠ General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	201131.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
	09 19 2014
Signature	

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 2 OF 2 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Every Voice Action	C C00566208
Check if 24-hour report	
Full Name of Payee	Date of Public Distribution/Dissemination
Murphy Vogel Askew Reilly LLC	09 18 2014
Mailing Address 1199 N Fairfax St Ste 220	mount
	10260.00
	10260.00 Transaction ID : VN7BA9VK7S0
Purpose of Expenditure Advertising Category/ Type 004	Date of Disbursement or Obligation
Name of Federal Candidate Support Office Sc	ought: House District:
Mike Rounds	resident Senate State: SD
Calendar Year-To-Date Per Election for Office Sought Disburse 211391.00 Disburse	ement For: Primary X General Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
	M = M / D = D / Y = Y = Y
Mailing Address A	Amount
City State Zip Code	
	Pate of Dishamous and an Obligation
Purpose of Expenditure Category/ Type	Date of Disbursement or Obligation
Name of Federal Candidate Support Office S	Sought: House District:
	resident Senate State:
Calendar Year-To-Date Per Election for Office Sought	ement For: Primary General
- Committee of the comm	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	10260.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	211391.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
David Donnelly [Electronically Filed] Date O9	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	